

# HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</i>	Attorney Docket No.	3258.1008-001
	First Named Inventor or Application Identifier	Walter Newman
	Express Mail Label No.	EV 214949983 US

Title of  
Invention **HMGB1 Combination Therapies**

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

1. ☐ Fee Transmittal Form  
*(Submit an original, and a duplicate for fee processing)*
2. ☒ Specification **Total Pages [ 61 ]**  
*(preferred arrangement set forth below)*
  - Descriptive title of the invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings *(if filed)*
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) **Total Sheets [ 18 ]**  
☐ Fig. of the Drawings for Publication ☐  
☒ No Figure to be Published
4. ☐ Oath or Declaration **Total Pages [ ]**
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 C.F.R. 1.63(d))  
*(for continuation/divisional with Box 17 completed)*
    - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b).
5. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*

6. ☒ Nucleotide and/or Amino Acid Sequence Submission  
*(if applicable, all necessary)*
  - a. ☒ Computer Readable Form
  - b. ☒ Paper Copy (identical to computer copy)  
**[ 19 ] Pages**
  - c. ☒ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & documents)  
☒ Assignee - Critical Therapeutics, Inc.  
 Cambridge, MA
8. ☐ Power of Attorney ☐ 37 C.F.R. 3.73(b) Statement
9. ☐ English Translation Document *(if applicable)*
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard
13. ☐ Small Entity Statement(s)
- 14a. ☐ Foreign Priority Claim under 35 U.S.C. §119 or 365
- 14b. ☐ Certified Copy of Priority Document(s)
15. ☐ Nonpublication Request *(check parent application)*
16. ☐ Other \_\_\_\_\_

17. **If a CONTINUING APPLICATION**, check appropriate box; supply the requisite information.

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

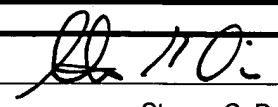
Prior application information: Examiner:

Group Art Unit:

**The entire disclosure of the prior application is considered a part of the disclosure of the accompanying application and is hereby incorporated by reference.**  
*(Add standard Related Applications section with incorporation by reference to specification or update same)*

## 18. CORRESPONDENCE ADDRESS

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